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gion of the corpus mamillare and the bundle of Vicq d'Azyr, but there was no indication that this bundle crossed as described by v. Monakow. These facts, besides showing the multiple origin of the fornix (v. Gudden), are taken to indicate that the most inferior of the fornix bundles arises from the lateral ganglion of the corpus mamillare (against v. Gudden), and that a connection exists between the tuberculum anterius and the parietal and occipital lobes.

*Ueber die experimentelle Verstopfung der Sinus Durae Matris.* P. FER-  
RARI. Wiener med. Jahrb. 1888, p. 81.

Contributions showing the conditions necessary for the circulation within the cranium are a natural result of the present interest in the surgical interference with the brain. By the injection of sterilized masses of wax and oil into the various cranial sinuses of the dog, the author has produced a mechanical obstruction in different portions of the venous outflow from the brain. The injection was made through the vena facialis or the vena ophthalmica, as the occasion demanded. By this means the sinuses of the roof or the base of the skull or the sinus cavernosus could each of them be separately injected, and when the injections were made at intervals, wax of different colors was used, thus enabling the experimenter to trace the result of each injection at the post-mortem. The general result was that very extensive plugging of the sinuses could be made without any serious symptoms or without giving rise to degenerative changes in the brain substance in the neighborhood of the plug. Indeed, all the sinuses of the roof could thus be plugged without causing any symptoms, but when all outflow was cut off the dog died in a few minutes, death being usually preceded by an epileptic attack.

*Ueber drei Fälle von progressiver Paralyse mit Herderkrankungen in der inneren Kapsel.* TH. ZACHER. Archiv f. Psychiatrie, XIX, 3, S. 726.

The descriptive anatomy of the brain suffers much confusion from the fact that it is, as a rule, very difficult to designate the exact level of the section by anything except a figure or an elaborate description. The latter is wearisome, but the lack of it may often cause misunderstanding. The position of the various tracts in the internal capsule is a case in point, for here the relative position is largely influenced by the level at which the section is made. This appears to be one source of the somewhat conflicting accounts of several authorities. From a study of his three cases, the author takes sides in the following way. A horizontal section of the brain made at such a level as to give nearly the maximum distance between the head and tail of the caudate nucleus displays the bands of white matter forming the internal capsule, the anterior limb lying between the head of the caudate and the lenticular nucleus, and the posterior limb between the lenticular nucleus and the optic thalamus. The two limbs meet at almost a right angle in this section, and form the portion known as the knee of the internal capsule. In the first case of the author, the lesion involved the major portion of the anterior limb, except the neighboring part of the knee, and no secondary degeneration was found in the corresponding crus. In the second case, the portion of the knee intact in the first instance was affected, and there was marked degeneration in the mesial portion of the pes. From this it is concluded that those fibers coming